

# Work Order ID 96091

Sunday, January 20, 2013 7:27:15 AM

\*96091\*

Page 1

Item ID: D4491-3

Accept

\*N900040100\*

Setup Start \*NS1\*

Revision ID:

Stop \*NS2\*

Item Name: Hinge, Left Lower

Start Date: 1/21/2013 Start Qty: 2.00

\*2\*

Cust Item ID:

Required Date: 2/1/2013 Req'd Qty: 2.00

\*2\*

Customer:

Reference:

Approvals: Process Plan: *MUF*

Date: 13-1-21 Tooling:

Date:

Run Start \*NR1\*

QC:

Date: SPC (Y/N):

Date:

Stop \*NR2\*

Sequence ID/  
Work Center ID

Operation  
Description

Set Up/  
Run Hours

Tool ID

Tool #

Plan  
Code

Accept  
Qty

Reject  
Qty

Reject  
Number

Insp.  
Stamp

Draw Nbr

Revision Nbr

D4491

A

100

0.00

\*100\*

Bandsaw

Jeaspa Bandsaw

Memo

CUT BLANK 5.7" LONG

0.00

110

0.00

\*110\*

Purchasing

Purchasing

Memo

ISSUE P/O: 18923  
TO ATG  
C OF C IS REQUIRED

0.00

105

120

0.00

\*120\*

QC

Quality Control

Memo

QC6- Inspect dimensions to drawing

0.00

CL 13/01/25 (2)

→ 13/03/01 (2)

D4491  
33  
88

13.01.22

23  
88

133 24

NCR: Yes / No

## WORK ORDER NON-CONFORMANCE / UPDATE

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
Root Cause	Date	Step	Qty	Description of work order update or Non-conformance	Initial Chief Eng	Action Description	Sign & Date	Verification	QC Inspector		
Doc/Data											
Equip/Tooling											
Operator											
Material											
Setup											
Other											
Process											
Supplier											
Training											
Unapproved											

FAULT CATEGORY				
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

**Work Order ID 96091****\*96091\***

Page 2

Item ID: D4491-3

Accept

**\*N900040100\***Setup Start **\*NS1\***

Revision ID:

Stop **\*NS2\***

Item Name: Hinge, Left Lower

Start Date: 1/21/2013 Start Qty: 2.00

**\*2\***

Cust Item ID:

Required Date: 2/1/2013 Req'd Qty: 2.00

**\*2\***

Customer:

Reference:

Approvals: Process Plan:

Date:

Tooling:

Date:

Run Start **\*NR1\***

QC:

Date:

SPC (Y/N):

Date:

Stop **\*NR2\***Sequence ID/  
Work Center IDOperation  
DescriptionSet Up/  
Run Hours

Tool ID

Tool #

Plan  
CodeAccept  
QtyReject  
QtyReject  
NumberInsp.  
Stamp

200

Identify as per dwg &amp; Stock Location

*8-111*

0.00

**\*200\***

Packaging

Memo

0.00

Packaging

*20**80*  
*B-3-4.*

210

QC21- Final Inspection - Work Order Release

0.00

**\*210\***

QC

Memo

0.00

Quality Control

*13/3/5* *AF**mr**13-3-4*

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

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Doc/Data <input type="checkbox"/>											
Equip/Tooling <input type="checkbox"/>											
Operator <input type="checkbox"/>											
Material <input type="checkbox"/>											
Setup <input type="checkbox"/>											
Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
Unapproved <input type="checkbox"/>											
<b>FAULT CATEGORY</b>											
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube				<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio				<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions		<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other	

# Picklist Print

Sunday, January 20, 2013 7:27:15 AM

Page 1

Work Order ID: 96091  
Parent Item: D4491-3  
Parent Item Name: Hinge, Left Lower

Start Date: 1/21/2013  
Start Qty: 2.00

Required Date: 2/1/2013  
Required Qty: 2.00

Comments: IPP REV:A NEW ISSUE 11-12-05 JLM VERIFIED BY:DD

Component Item ID/ Item Name	Replacement Item ID	Mfg/ Purch	Bin Item	Primary Location	Last Location	Route Seq ID	Unit of Measure	Qty on Hand	Qty per Kit	Total Qty	Qty Issued	Date Issued	Status
D4491-3 Hinge Fork		Purchased	No				Each	0.0000		2		1/13/3/01	(2)
M304B3.500X03.500 304 BAR 3.500" X 3.500"		Purchased	No				f	15.5300		0.96			

## Location

MAT049

120006

123156

## Loc Qty

15.53

1.2

14.33

## Loc Code

.96

D4491-3  
335  
13.01.22

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Doc/Data <input type="checkbox"/>											
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Other <input type="checkbox"/>											
Process <input type="checkbox"/>											
Supplier <input type="checkbox"/>											
Training <input type="checkbox"/>											
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8 7 6 5 4 3 2 1

D

C

B

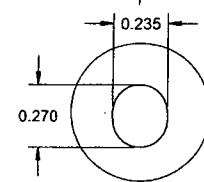
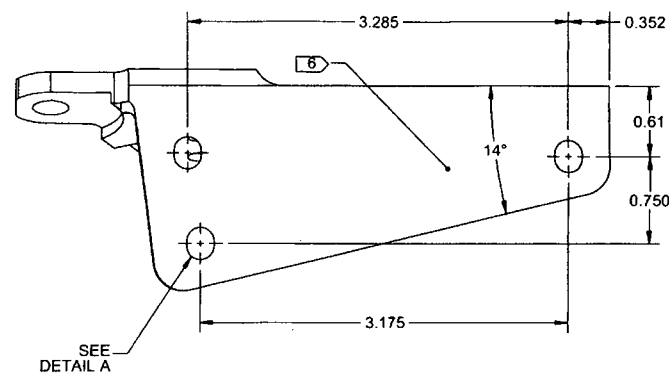
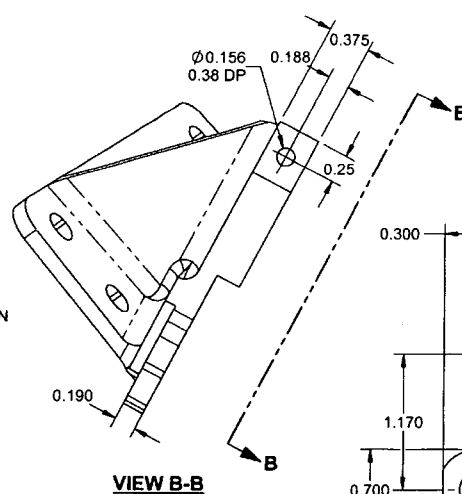
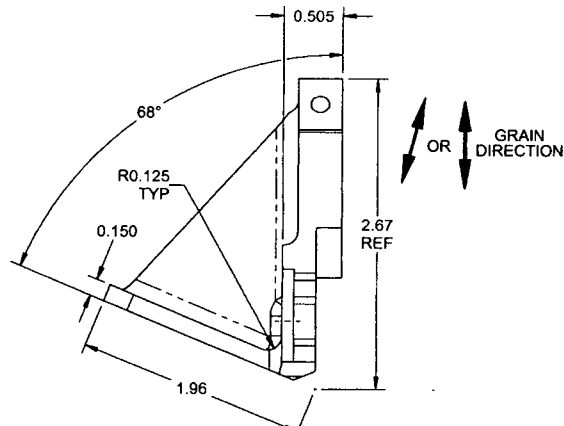
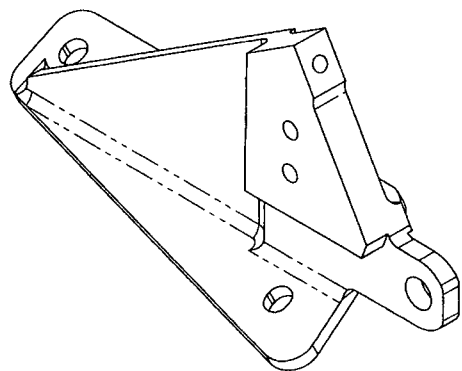
A

D

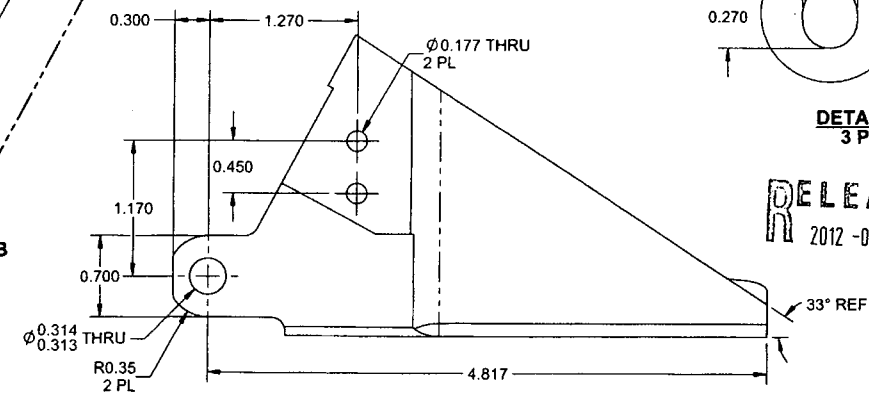
C

B

A



DETAIL A  
3 PL



- NOTES:
- 1) MATERIAL: AISI 303 SS BAR PER ASTM A582  
REF DART SPEC M303B OR  
AISI 304/316 SS BAR OR PLATE  
PER ASTM A276 OR ASTM A240  
REF DART SPEC M304B
  - 2) FINISH: NONE
  - 3) TOLERANCES: PER DART QSI 018 UNLESS OTHERWISE NOTED
  - 4) UNITS: INCHES UNLESS OTHERWISE NOTED
  - 5) BREAK SHARP EDGES: 0.005 TO 0.010 MAX
  - 6) IDENTIFICATION: IDENTIFY PER QSI044 6.1
  - 7) WEIGHT: 0.61 lbs
  - 8) PROFILE PER DRAWING FILE "D4491-3-REVA.STP"

D4491-3 HINGE, LEFT-LOWER

DESIGN	RP	DART AEROSPACE LTD	
DRAWN	RP	HAWKESBURY, ONTARIO, CANADA	
CHECKED	<i>[Signature]</i>	DRAWING NO.	REV. A
MFG. APPR.	<i>[Signature]</i>	D4491	SHEET 3 OF 6
APPROVED	<i>[Signature]</i>	TITLE	SCALE
DE APPR.	<i>[Signature]</i>	DOOR HINGE SETS	NTS
DATE	12.01.23	<small>COPYRIGHT © 2012 BY DART AEROSPACE LTD THIS DOCUMENT IS PRIVATE AND CONFIDENTIAL AND IS SUPPLIED ON THE EXPRESS CONDITION THAT IT IS NOT TO BE USED FOR ANY PURPOSE OR COPIED OR COMMUNICATED TO ANY OTHER PERSON WITHOUT WRITTEN PERMISSION FROM DART AEROSPACE LTD.</small>	

NCR: Yes / No

**WORK ORDER NON-CONFORMANCE / UPDATE**

DQA: \_\_\_\_\_ Date: \_\_\_\_\_

QA Closed: \_\_\_\_\_ Date: \_\_\_\_\_

Work Order: _____  Part No. _____  NCR No. _____				<b>DISPOSITION</b>  Rework <input type="checkbox"/> Scrap <input type="checkbox"/> Use-as-is <input type="checkbox"/> Work Order Update <input type="checkbox"/>		<b>AGAINST DEPARTMENT/PROCESS</b>  <div style="display: flex; justify-content: space-between;"> <div>           Skid-tube <input type="checkbox"/>            Machining <input type="checkbox"/>            Thermoforming <input type="checkbox"/>            Large Fab <input type="checkbox"/> </div> <div>           Crosstube <input type="checkbox"/>            Small Fab <input type="checkbox"/>            Finishing <input type="checkbox"/>            Composite <input type="checkbox"/> </div> <div>           Water Jet <input type="checkbox"/>            Prod. Eng. Coord. <input type="checkbox"/>            Rec/Store/Packaging <input type="checkbox"/>            Supplier <input type="checkbox"/> </div> <div>           Engineering <input type="checkbox"/>            Quality <input type="checkbox"/>            Other <input type="checkbox"/> </div> </div>					
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Doc/Data											
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FAULT CATEGORY			
<b>Landing Gear</b> <input type="checkbox"/> Bending <input type="checkbox"/> Centre Not Concentric to O/S <input type="checkbox"/> Cracks <input type="checkbox"/> Crushed/Crimped <input type="checkbox"/> Cuffs <input type="checkbox"/> Heat Treat <input type="checkbox"/> Inspection Strip in Tube <input type="checkbox"/> Ripples in Bend <input type="checkbox"/> Torque Waves in Extrusion <input type="checkbox"/> Turning Sequence <input type="checkbox"/> Wave/Twist in Tube	<b>General</b> <input type="checkbox"/> Bend <input type="checkbox"/> BOM/Route <input type="checkbox"/> Broken/Damaged <input type="checkbox"/> Burrs <input type="checkbox"/> Contamination <input type="checkbox"/> Countersink <input type="checkbox"/> Cut Too Short <input type="checkbox"/> Drill Holes <input type="checkbox"/> Drawing <input type="checkbox"/> Finish <input type="checkbox"/> Folio	<input type="checkbox"/> Grain <input type="checkbox"/> Hardware <input type="checkbox"/> Inspection Incomplete <input type="checkbox"/> Instructions Incomplete/Unclear <input type="checkbox"/> Maintenance <input type="checkbox"/> Mislabeled <input type="checkbox"/> Misread <input type="checkbox"/> Offset <input type="checkbox"/> Out of Calibration <input type="checkbox"/> Out of Sequence <input type="checkbox"/> Outside Dimensions	<input type="checkbox"/> Ovalized <input type="checkbox"/> Over/Under tolerance <input type="checkbox"/> Part Incorrect <input type="checkbox"/> Part Lost/Missing <input type="checkbox"/> Part Moved <input type="checkbox"/> Positioned Wrong <input type="checkbox"/> Power Loss/Surge  <input type="checkbox"/> Pressure/Forced <input type="checkbox"/> Temperature/Cure <input type="checkbox"/> Weld <input type="checkbox"/> Wrong Stock Pulled  <input type="checkbox"/> Other





Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury, ON K6A 1K7  
Tel: 613 632 9577  
Fax: 613 632 1053

## PURCHASE ORDER

Purchase Order ID **PO18923**

Purchase Order Date 1/23/13

PO Print Date 1/30/13

Page Number 2 of 3

Order From :

VC-GLO001

ARCHER PRECISION INC.  
2228 GLADWIN CRESENT  
OTTAWA, ON K1B 4S6  
CA

Contact Name

Vendor Phone

Vendor Fax

Vendor Account Nbr

613 899 2405

Buyer

Requisition Nbr

Tax Resale Nbr

Terms

Currency

FOB

Chantal Lavoie

10127-2607

Net 30

CAD

Destination-Collect

Special Inst: AS PER DWG D4472 REV. B  
B96012

5	D4473-1P	Small Rib, LH	2/15/13 Yes	1.00 Each	FedEx PI collect	\$280.9200	\$280.92
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Special Inst: AS PER DWG D4473 REV. B  
B93013

6	D4476-1P	Small Rib (Lower Door)	2/15/13 Yes	1.00 Each	FedEx PI collect	\$280.9200	\$280.92
---	----------	------------------------	----------------	--------------	------------------	------------	----------

Special Inst: AS PER DWG D4476 REV. B  
B96014

7	D4477-1P	Small Rib (Lower Door)	2/15/13 Yes	4.00 Each	FedEx PI collect	\$84.0400	\$336.16
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Special Inst: AS PER DWG D4477 REV. B  
B95478

8	D4491-3P	Hinge, Left Lower	2/15/13 Yes	2.00 Each	FedEx PI collect	\$501.9200	\$1,003.84
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Special Inst:

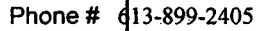
9	D4494-1P	Upper Block Lower Door LH	2/15/13 Yes	1.00 Each	FedEx PI collect	\$361.0800	\$361.08
---	----------	------------------------------	----------------	--------------	------------------	------------	----------

No substitution or deviation without  
consent.  
Certificate of Conformity or Material  
Certification required **YES** NO

Change Nbr:

8

Change Date: 1/30/13



Date	Invoice #
2/27/2013	406

P.O. No.	Ship	Via	FOB	Project
18923	2/27/2013	delivered	Archer	

	Qty	Item Code	Description
	2	Sales	D4491-3P HST (ON) on sales



2228 Gladwin Cres.  
Ottawa, Ont.  
K1B 4S6

Telephone (613) 899-2405  
Fax (613) 226-1719

## Certificate of Compliance

To:  
Dart Aerospace Ltd.  
1270 Aberdeen Street  
Hawkesbury Ont.  
K6A 1K7

Po Number	Part Number	Quantities
18923	D4491-3P	2

It is hereby certified that all articles mentioned above are in conformance with the requirements, specification and drawings as listed on customer purchase order number, 18923 issued by Dart Aerospace Inc.

Alex Mazerolle  
President  
Archer Precision Inc.  
1393 Major Road,  
Orleans Ontario  
K1E 1H3

# Inspection Report

Customer Name		QTY	DWG #	REV.	Part Name	Date	Lot#	Job #
Dart Aerospace		2	D4491-3	A	HINGE, LEFT-LOWER	5/FEB/13		695-8
Inspection Interval								
1 of								
WG. Dim	Tolerance	Operator First Off	QA First A R	QA Final A R	2			
Rev	A	✓	✓	✓				
MAT	303	✓	✓	✓				
SUB	NO		✓	✓				
Deburr	YES	✓	✓	✓				
.505	±0.010	.501	✓	✓	.498			
68°	±0.5°	68°	✓	✓	68°			
R0.125	±0.010	PP	✓	✓	PP			
.150	±0.010	.148	✓	✓	.148			
1.96	±0.030	PP	✓	✓	PP			
2.67	±0.030	PP	✓	✓	PP			
.190	±0.010	.189	✓	✓	.190			
Ø0.156	+0.005/-0.001	.157	✓	✓	.157			
.38	±0.030	.395	✓	✓	.391			
.188	±0.010	.188	✓	✓	.188			
.375	±0.010	.371	✓	✓	.371			
.25	±0.030	.249	✓	✓	.25			
.300	±0.010	.296	✓	✓	.291			
1.270	±0.010	1.271	✓	✓	1.270			
Ø0.177	+0.005/-0.001	.178	✓	✓	.178			
2 PLS	-	✓	✓	✓	✓			
.450	±0.010	.451	✓	✓	.450			
1.170	±0.010	1.170	✓	✓	1.170			
.700	±0.010	.6995	✓	✓	.700			
Ø.313-.314		.3135	✓	✓	.3135			
R0.35	±0.030	PP	✓	✓	PP			

Date of Issue July, 13, 2005.

22	2 PLS	-	✓	/	/	✓
23	4.817	±0.010	4.8165	/	/	4.817
24	33°	±1/2°	33°	/	/	33
25	3 PLS	-	✓	/	/	✓
26	.270	±0.010	.273	/	/	.273
27	.235	±0.010	.235	/	/	.235
28	3.175	±0.010	3.175	✓	/	3.175
29	.750	±0.010	.750	/	/	.750
30	.61	±0.030	.610	/	/	.608
31	.352	±0.010	.353	/	/	.352
32	14°	±1/2°	14	/	/	14°
33	3.285	±0.010	3.285	/	/	3.285